

20/11/2019  
C-18

**Part I Choose the single answer**

1. The most significant risk factor for the development of adenocarcinoma of esophagus is:

- a. Alcohol abuse.
- b. Achalasia
- c. Smoking
- d. Barrett's esophagus.

2. All the following statements about paraesophageal hernia are true EXCEPT:

- a. It can be life-threatening
- b. Heartburn is usually chief complaint.
- c. The herniated portion may become gangrenous and perforated.
- d. Surgical repair is indicated.

3. The most common initial manifestation of acute intracranial haemorrhage in the victim of head trauma is

- a. Change in level of consciousness
- b. Ipsilateral (side of hemorrhage) pupillary dilation
- c. Hemiparesis
- d. Hypertension

4. Which of the following organisms is most closely associated with gastric and duodenal ulcer disease?

- a. Campylobacter
- b. Cytomegalovirus
- c. Helicobacter
- d. Yersinia enterocolitica

5. Which of the following colonic pathologies have no malignant potential?

- a. Ulcerative colitis
- b. Villous adenomas
- c. Familial polyposis
- d. Peutz-Jeghers syndrome

6. The MOST frequent indication for surgery in Crohn's disease of the small intestine is:

- a. Internal fistula.
- b. Intra-abdominal abscess.
- c. Partial obstruction.
- d. Abdominal mass.

7. Which of the following statements regarding direct inguinal hernias is true?

- a. They are the most common inguinal hernias in women
- b. They protrude medially to the inferior epigastric vessels
- c. They commonly protrude into the scrotal sac in men
- d. They incarcerate more commonly than indirect hernias

8. Concerning cholangitis all the following are true EXCEPT:

- a. The most common infecting organism is Staphylococcus aureus
- b. The diagnosis is suggested by the Charcot triad
- c. Treated by massive antibiotics and endoscopic stent of the CBD
- d. May be complicated by septic shock.

17. Regarding osteosarcomas
- Affect the epiphyses of long bones.
  - Are most commonly seen around the knee.
  - Characterised by bone destruction without new bone formation.
  - Most patients are above 40 years of age.
18. The primary survey of the multiply injured patient is the:
- Identification of treatable injury.
  - Identification of injuries requiring surgery.
  - Identification of patients requiring immediate transfer to a specialist centre.
  - Identification of life-threatening injuries and stabilizing the patient's condition.
19. The effect of shock on tissues of the body will lead to:
- Aerobic metabolism and metabolic acidosis
  - Aerobic metabolism and respiratory acidosis
  - Anaerobic metabolism and metabolic acidosis
  - Anaerobic metabolism and respiratory acidosis
20. In simple intestinal obstruction, a low blood pressure is a result of:
- Failure of the heart to pump blood to tissues
  - Reduction of the circulatory volume
  - Mechanical obstruction of cardiac filling
  - Vasodilatation with low systemic vascular resistance
21. A boy with blood group 'B' - Rh positive has:
- B surface antigens on his RBCs and Rh antibodies in his serum
  - B antibodies in his serum and Rh antigens on his RBCs
  - B and Rh surface antigens on his RBCs
  - B and Rh antibodies in his serum
22. Massive transfusion of cold blood may be complicated by any of the following EXCEPT:
- Cardiac arrest
  - Congestive heart failure
  - Hypokalemia
  - Coagulation failure
23. Regarding surgical antimicrobial prophylaxis all the following are true EXCEPT
- It is necessary in clean wounds.
  - It should be given 30 minutes before skin incision.
  - Discontinuation of the antibiotic within 24 hours after surgery is recommended.
  - Indiscriminate use of antimicrobials can lead to the development of antibiotic resistant microorganisms.
24. In a patient with uncomplicated amoebic liver abscess, the main line of treatment is:
- Drug treatment with repeated guided aspiration if needed
  - Extraperitoneal drainage once the abscess is detected by US
  - Transperitoneal drainage to look for possible large bowel amoebomas
  - Segmental resection of affected segment to avoid peritoneal contamination



25. In a patient with gas gangrene, all of the following are important in management EXCEPT?
- Intravenous penicillin
  - Anti gas gangrene serum
  - Surgical exposure of all affected areas
  - Blood transfusion
26. A 56 year old diabetic female developed foot infection. Her 1st care doctor drained infection and started empirical broad spectrum antibiotic. On follow up, she developed gangrene of her 2nd toe. The next important step in management of this patient is:
- Check the sensitivity of the organism to antibiotic according to culture
  - Check adequacy of foot perfusion by clinical or Doppler examination
  - Check diabetes control and improve local foot circulation by vasodilators
  - Prevent further extension of gangrene by urgent toe amputation
27. A patient presented with pain in the LL lower limb that increases on walking or standing of several months duration. One year ago, he was admitted to hospital because of acute lower limb pain and was treated with heparin. On examination, the limb was swollen, warm and the pedal pulse was not easily felt because of swelling. The most possible diagnosis is:
- Chronic arterial insufficiency
  - Chronic venous insufficiency
  - Chronic lymphatic insufficiency
  - Mismanaged recurrent cellulitis
28. A patient is receiving anticoagulation for treatment of deep venous thrombosis. Which of the following findings suggest that he is given warfarin?
- Anticoagulation is monitored by assessing the prothrombin time
  - Anticoagulation can be reversed by giving protamine sulfate
  - Anticoagulation is achieved within one hour of drug administration
  - The anticoagulant is administered by subcutaneous injection
29. A patient with dilated tortuous veins over his lower abdomen filling predominantly from below upwards. This clinical finding can be associated with:
- Chronic Superior vena-cava obstruction
  - Chronic inferior vena-cava obstruction
  - Chronic portal hypertension
  - Chronic pelvic congestion
30. One of the complications of leg varicose veins are acute superficial thrombophlebitis. The main line of treatment for this condition is:
- Systemic anti-inflammatory drugs and external compression
  - Local anti-inflammatory ointments and external compression
  - Systemic broad spectrum antibiotic and external compression
  - Local antibiotic ointments and external compression

31. A patient presented with acute lower limb ischemia. Which of the following findings will suggest acute embolism?
- Recent history of myocardial infarction
  - Past history of claudication
  - Motor car accident with fracture pelvis and femur
  - Recent history of repeated vomiting and diarrhea
32. The extracellular fluid differs from the intracellular fluid in all of the following EXCEPT:
- Protein content.
  - Electrolyte composition.
  - Volume.
  - Osmolarity (tonicity).
33. Concerning metabolic acidosis, which of the following statements is untrue:
- Occurs in diabetes, starvation, shock and anuria.
  - Is often associated with air hunger.
  - Causes bradycardia and hypotension.
  - Always follows cardiac arrest.
34. The most common problem resulting in defective haemostasis is:
- Factor VIII deficiency.
  - Thrombocytopenia.
  - Increased fibrinolysis.
  - All of the above.
35. What is not True of flail chest:
- Paradoxical chest movement.
  - Right to left shunt with systemic desaturation.
  - Can occur when multiple ribs are fractured at one place.
  - May need endotracheal intubation and positive pressure ventilation
36. The MOST common cause of empyema is:
- Pneumonic process in the underlying lung.
  - Rupture of an emphysematous bulla
  - Penetrating injury of the chest.
  - Subphrenic abscess.
37. Regarding The prothrombin time all the following are true EXCEPT:
- Measures the activity of the extrinsic coagulation pathway.
  - Is not usually prolonged in liver disease.
  - Can be expressed as the INR when monitoring warfarin dosage.
  - Is prolonged in vitamin K malabsorption (obstructive jaundice).
38. The most important aspect in treating disseminated intravascular coagulation (DIC) is to:
- Administer heparin.
  - Administer platelets.
  - Treat the underlying disease process.
  - Transfuse with fresh frozen plasma and cryoprecipitate.
39. A sequestration dermoid cyst is:
- Due to squamous cells being driven in by a needle.
  - Due to cells being buried during development.
  - May affect limbs.
  - A variety of sebaceous cyst.



40. The most important cause of post-operative wound infection is:
- Inadequate preoperative preparation of the skin.
  - Poor local blood supply.
  - Presence of dead space.
  - Post-operative contamination.
41. A patient who has recovered from tetanus:
- Should be given tetanus toxoid.
  - Should be given antitetanic serum (immunoglobulins).
  - Should be given both toxoid and immunoglobulins.
  - Do not required anything as infection itself induces immunity.
42. The hand infection which carries the highest risk of developing osteomyelitis is:
- Intrahecal whitlow.
  - Distal pulp space infection (felon).
  - Web space infection.
  - Thenar space infection.
43. Regarding thyroglossal fistula all are true EXCEPT:
- It is congenital.
  - Follows infection.
  - Follows inadequate removal of a thyroglossal cyst.
  - Is lined by columnar epithelium.
44. Non-malignant conditions of the breast include all the following EXCEPT:
- Cystosarcoma phyllodes.
  - Duct ectasia.
  - Giant fibroadenoma.
  - Paget's disease of the nipple.
45. When stage I breast cancer is treated by partial mastectomy and axillary dissection, further therapy should include:
- Nothing.
  - Chemotherapy.
  - Antioestrogen agents.
  - Radiation of the affected breast.
46. Warthin's tumour refers to:
- Pleomorphic adenoma.
  - Adenolymphoma.
  - Mucoepidermoid tumour.
  - Adenoid cystic carcinoma.
47. The treatment of submandibular calculus lying within the duct is to:
- Dilate the duct.
  - Remove the stone by making an opening in the duct.
  - Slit open the duct at the papilla.
  - Remove the gland.
48. Characteristics of cystic hygroma include all EXCEPT:
- Develops from jugular lymph sacs.
  - Brilliantly translucent.
  - Typically occupies the middle third of neck.
  - Enlarges when the child cries.

49. Anal examination reveals a fistulous opening 2 cm lateral to the anus. The fistula traverses the internal anal sphincter, the intersphincteric plane, and a portion of the external anal sphincter. The fistula is categorized as:
- Intersphincteric.
  - Transsphincteric.
  - Suprasphincteric
  - Extrasphincteric
50. Manometric findings in a patient of achalasia will show:
- Low LES pressure, no relaxation with swallowing.
  - High LES pressure, inadequate relaxation with swallowing.
  - High LES pressure, normal relaxation with swallowing.
  - None of the above.
51. Most common diaphragmatic hernia in infants is:
- Bochdalek's hernia.
  - Sliding oesophageal hiatal hernia.
  - Paraesophageal hiatal hernia.
  - None of the above.
52. Most common site of carcinoma of the stomach is:
- Gastroesophageal junction.
  - Fundus
  - Body.
  - Antrum.
53. Ramstedt's operation is done for:
- Hirschsprung's disease.
  - Congenital pyloric stenosis.
  - Diaphragmatic hernia.
  - None of the above
54. For variceal bleeding not responding to drug and sclerotherapy, the best recent option will be:
- Embolisation.
  - Surgical ligation.
  - TIPSS.
  - Liver transplant.
55. The treatment of choice in Primary sclerosing cholangitis is:
- Balloon dilatation.
  - Biliary stenting.
  - Ursodeoxycholic acid.
  - Liver transplant.
56. A 30 year-old woman is accidentally found to have a wide mouthed Meckel's diverticulum during laparotomy. Best method of treatment:
- Diverticulectomy.
  - Leave it alone.
  - Resection of diverticulum with a short segment of ileum and anastomoses.
  - Resection of diverticulum and stump is invaginated.

57. Duhamel operation is done for which of the following condition:

- a. Congenital pyloric stenosis.
- b. Hiatus hernia.
- c. Achalasia cardia.
- d. Hirschsprug's disease.

*[Handwritten mark]*

58. Pancreatic pseudocyst is usually drained to:

- a. Abdominal wall.
- b. Stomach.
- c. Duodenum.
- d. Ileum

59. The classical triad of choledochal cyst is:

- a. Jaundice, pain and right hypochondrial mass.
- b. Jaundice, hepatomegaly and pain.
- c. Jaundice, pancreatitis and hepatomegaly.
- d. All of the above.

*[Handwritten mark]*

60. What is the MOST common infecting organism in overwhelming postsplenectomy infection:

- a. Escherichia coli.
- b. Meningococcus.
- c. Streptococcus.
- d. Pneumococcus.



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## Part II (True and False)

### 61. Clinical picture of tension pneumothorax includes :

- a- Tachypnoea ✓
- b- Decreased percussion note on the injured side ✗
- c- Collapsed neck veins ✗
- d- Decreased chest wall movement on the injured side. ✓

### 62. Regarding skin grafting:

- a- A split-skin graft involves 50% of epidermal thickness ✗
- b- A skin graft normally 'takes' within 24h of grafting. ✓
- c- Muscle normally provides a suitable bed for split-skin grafting.
- d- Bare cortical bone, bare cartilage and bare tendons are poor recipient sites

### 63. Potassium deficiency should be suspected:

- a- In cases of paralytic ileus.
- b- When the patient's reflexes are exaggerated.
- c- If there is an increase in height and peaking of the T waves of an ECG.
- d- In alkalosis

### 64. Regarding fresh frozen plasma:

- a- Contains Factor VIII and fibrinogen.
- b- Is used in treatment of DIC.
- c- Is used for reversal of warfarin.
- d- May transmit hepatitis C.

### 65. Regarding malignant melanoma:

- a- Breslow's thickness is a better prognostic indicator than Clark's levels.
- b- May arise in a pre-existing naevus.
- c- The most common type is nodular.
- d- If thicker than 1mm should be excised with a margin of 1cm.

### 66. Regarding Hodgkin's disease:

- a- Has a unimodal age distribution.
- b- Commonly presents with lymphadenopathy below the diaphragm.
- c- Should be staged by CT of chest and abdomen.
- d- The mixed cellularity type has better prognosis than lymphocytic predominance

### 67. Concerning invasive breast carcinoma :

- a- Ductal type is the most common.
- b- Mucinous type tends to be more aggressive.
- c- Lobular type is more commonly bilateral.
- d- Medullary type is characterized by lymphocytic infiltration.

### 68. Regarding massive lower gastrointestinal bleeding:

- a- Should be investigated by emergency colonoscopy.
- b- Is usually a result of carcinoma in elderly.
- c- It is commonly caused by angiodysplasia on the right colon & diverticulosis on the left colon.
- d- Settles spontaneously in the majority of patients on conservative treatment.



69. Regarding carcinoid tumours of the gastrointestinal tract:
- a- Are most commonly located in the appendix.
  - b- Are usually malignant.
  - c- Arise in the submucosa.
  - d- Are frequently the cause of gastrointestinal haemorrhage.
70. Regarding pheochromocytoma:
- a- Represent tumours of adrenal cortex.
  - b- Are associated with MEN I syndrome.
  - c- May be found at aortic bifurcation.
  - d- Are frequently bilateral.
71. Regarding carcinoma of the lip:
- a- If occurring at the angle of the mouth, tends to be more malignant in behavior than carcinoma of the upper or lower lip.
  - b- Is curable by surgery.
  - c- Is radio-resistant.
  - d- Carries a 40% five-year survival rate if seen in its early stages.
72. Regarding septic shock:
- a- Is only caused by gram-negative organisms.
  - b- Carries a favorable prognosis.
  - c- Produces cellular defect that inhibits oxygen utilization.
  - d- Is particularly associated with infective complications of the gastrointestinal and genito-urinary systems.
73. Regarding Ochsner Sherrren regimen for appendicular mass it should be terminated in presence of:
- a- Rising pulse rate.
  - b- Copious constant gastric aspirate.
  - c- Spreading abdominal pain.
  - d- Increase in size of the mass.
74. Indications for haemorrhoidectomy include :
- a- Failure of non-operative treatments of 2<sup>nd</sup> degree piles
  - b- 3<sup>rd</sup> degree haemorrhoids
  - c- 1<sup>st</sup> degree haemorrhoids
  - d- Internoexternal haemorrhoids
75. Regarding clinical features of Leriche's syndrome:
- a- Claudication in the calves, thighs and buttocks.
  - b- Sexual impotence in the male.
  - c- Severe nutritional changes in the feet and legs.
  - d- Absent femoral, popliteal and ankle pulses.
76. Regarding Buerger's disease:
- a- Is a segmental occlusive disease of both arteries and veins.
  - b- Occurs most often in young males.
  - c- Affects large arteries only.
  - d- May be preceded by phlebitis migrans

77. Regarding abdominal aortic aneurysms:
- Are commonest in the sixth and seventh decades.
  - Have a much higher incidence in males than females.
  - Characteristically originate below the renal arteries.
  - Never extend beyond the aortic bifurcation.
78. Regarding fluid replacement in Extensive burns, during the first 24 hours:
- May consist of Ringer lactate alone (parkland formula).
  - Should be controlled by the hourly urine output.
  - Is calculated according to the body weight and the surface area.
  - Is given at a uniform rate.
79. Regarding secondary brain injury choose the correct answer:
- It may be caused by hypoxaemia
  - It may be caused by hypercapnia
  - It may be caused by intracranial haematoma
  - It may be caused by intracranial hypertension
80. Middle cranial fossa fractures present with:
- Otorrhoea.
  - Rhinorrhoea.
  - Battle sign.
  - I and II cranial palsy.
81. Depressed fractures of the skull are characterized:
- Are often compound.
  - May involve the base of the skull.
  - May be associated with profuse bleeding, leakage of CSF or protrusion of brain matter.
  - Always require urgent operation.
82. Regarding clinical picture of division of the median nerve above the wrist:
- "Ape-hand" deformity.
  - Loss of opposition of thumb to little finger.
  - Preservation of pronation of forearm.
  - Pointing index during clasping the hands.
83. Regarding polycystic kidney:
- Autosomal recessive trait.
  - The disease is not usually detectable on standard imaging until the second or third decade of life.
  - The disease does not usually manifest itself clinically before the age of 30 years.
  - Presents by hematuria, hypertension and urinary tract infection.
84. Renal tuberculosis should be suspected in presence of:
- Sterile pyuria.
  - Renal calcification.
  - Indistinct outline of papilla in IVP.
  - Urinary frequency and haematuria.



85. Regarding Wilms' tumour:
- a- Common in first 4 years of life
  - b- Contains only epithelial elements
  - c- Lymphatic spread is uncommon
  - d- Nephrectomy achieves 80% survival at 5 years
86. Triple phosphate stone consists of:
- a- Ammonium.
  - b- Magnesium.
  - c- Calcium.
  - d- Sodium
87. Regarding Dupuytren's contracture:
- a- It is a contracture of the flexor tendons of the ring and little fingers.
  - b- It is a contracture of the palmar fascia.
  - c- It may occur in the plantar fascia.
  - d- There is an association with cirrhosis of the liver.
88. Immobilization is not required in fracture involving:
- a- Scapula.
  - b- Wings of ilium.
  - c- Rib.
  - d- Proximal humerus in elderly.
89. Regarding Sudek's atrophy of hand:
- a- Hand is painful and swollen
  - b- Osteoporosis of carpals and metacarpals.
  - c- There is decrease blood flow to para-articular areas.
  - d- Cervical sympathectomy may be of help.
90. Regarding intertrochanteric fracture of femur:
- a- Limb shortening.
  - b- Malunion.
  - c- Avascular necrosis of femoral head.
  - d- Internal fixation is preferred
91. Regarding upper limb peripheral nerve injuries
- a. Injury to the median nerve results in a wrist drop
  - d. Injury to the median nerve results in loss of sensation over the palmar aspect of the index finger
  - c. Injury to the radial nerve results in loss of sensation in the anatomical snuffbox
  - d. Injury to the ulnar nerve results in a claw hand
92. Perthe's disease
- a. Usually presents before 10 years of age
  - b. Is due to avascular necrosis of the distal femoral epiphysis
  - c. Is more common in girls
  - d. Plain x-ray may show the capital femoral epiphysis to be smaller, denser and flatter

93. A 15-year-old boy is struck by a stone in the side of the head. He briefly loses consciousness but quickly returns to a lucid state. Concerning his subsequent course:
- a- If the patient has a normal neurologic examination at the time of emergency room assessment, he can be discharged safely to home.
  - b- A head computed tomography (CT) scan should be performed regardless of the current neurologic examination.
  - c- The likely mechanism of injury arises from a tear of a branch of the middle meningeal artery as it courses through a groove in the skull at the area of impact.
  - d- If, after an initial lucid interval, a rapid progression to coma with fixed and dilated pupils and decerebration occurs, the most likely CT finding would be a subdural hematoma.

94. Haematuria:

- a- At the beginning of micturition is usually indicative of urethral pathology
- b- At the end of micturition is usually indicative of bladder pathology
- c- Throughout the urine stream is typical of renal pathology
- d- In elderly males may be due to benign prostatic hypertrophy

95. In tuberculosis of the bone:

- a- The local reaction is characterized by extensive new bone formation
- b- The metaphysis is the commonest site involved
- c- The infection is usually secondary to a distant focus of the disease
- d- Extension of the bone abscess into the joint is common

96. Concerning basal cell carcinoma:

- a- Arises from the basal area of skin appendages.
- b- It is an aggressively malignant tumour with early lymph node metastasis.
- c- 90% of lesions found in the face.
- d- Chemotherapy plays an important role in the management.

97. In an adult patient with fracture shaft of femur:

- a- Up to two liters of blood can be lost in the thigh without obvious swelling or bruising.
- b- Fat embolism can occur as early as few hours after injury.
- c- Distal absent pulses should be treated by immediate heparinization.
- d- Risk of deep venous thrombosis in the postoperative period is excluded if internal fixation was done properly.

98. Papillary carcinoma of the thyroid

- a. Can be reliably diagnosed using fine needle aspiration cytology
- b. Is almost always unifocal
- c. Typically spread to the cervical lymph nodes
- d. Requires a total thyroidectomy for large tumours

99. Duct ectasia

- a. Is often associated with both aerobic and anaerobic bacterial infection
- b. May present with a green or watery nipple discharge
- c. May present with nipple inversion
- d. Can be adequately treated with a microdochectomy



100. Regarding medullary carcinoma of thyroid gland
- Is a tumour of the parafollicular C cells
  - Produce thyroxine as the principle hormone
  - Can occur as part of the MEN type II syndrome
  - Total thyroidectomy is the surgical treatment of choice
101. The pathology of ulcerative colitis
- Shows full thickness inflammation
  - The rectum is almost always involved
  - Enterocutaneous or intestinal fistulae are common
  - The serosa is usually normal
102. Concerning skull fracture
- A simple non depressed linear skull fracture is of no significant consequence
  - Most depressed skull fractures require surgery to elevate the depressed bone fragment regardless of neurological status
  - Basal skull fractures involve the middle cranial fossa may be suggested by bruising behind the ear
  - CSF rhinorrhea associated with a basal skull fracture requires immediate surgical exploration and repair of the defect
103. A pilonidal sinus:
- Occurs in the webs of fingers.
  - Occurs in the umbilicus.
  - Occurs in the nasal cleft.
  - Rarely progresses to abscess formation
104. When determining the depth of a burn:
- A knowledge of the type of injury is important
  - The presence of blisters indicates a full thickness skin loss
  - Sensitivity on pricking the burned area indicates a full thickness loss
  - The presence of severe pain occurs with superficial burns
105. Paralytic ileus:
- Is associated with electrolyte imbalance
  - Is associated with severe bouts of abdominal colics
  - Requires treatment with nasogastric suction and intravenous fluids
  - Might be secondary to a retroperitoneal haematoma
106. Surgical drainage of abscesses:
- Should be via a small incision with minimal disturbance of the adjacent tissue
  - Should be dependent whenever possible
  - May be replaced by antibiotic therapy
  - Should be followed by suture closure of the incision
107. With regard to appendicitis
- The presence of an appendix mass necessitates immediate surgical intervention.
  - A normal white cell count excludes appendicitis.
  - Loss of appetite is a common feature of acute appendicitis.
  - Rovsing's sign is an increase in pain in the left iliac fossa when the right iliac fossa is palpated.

**108. Concerning the diagnosis and treatment of hydatid cysts.**

- a- Percutaneous aspiration is an important aspect of diagnosis and treatment of a hydatid cyst
- b- CT scan will show cystic liver lesion
- c- At operation, care must be taken to protect the operative field from spillage of the cyst fluid
- d- The use of a scolecicide has become obsolete.

**109. Concerning fracture healing:**

- a- Delayed union refers to fracture healing which takes longer than normal.
- b- Non-union refers to complete failure of a fracture to unite.
- c- Mal-union refers to a fracture which unites but in a non-anatomical position.
- d- A pathological fracture refers to a fracture which occurs in bone weakened by pre-existing disease.

**110. As regards to treatment of hepato-cellular carcinoma(HCC)**

- a. Liver resection for solitary HCC in patients with preserved liver function.
- b. Liver transplantation is indicated in cirrhotic patients with a small HCC
- c. Percutaneous ethanol injections (PEI), cryotherapy & radiofrequency ablation are used when the above measures are not feasible.
- d. Traditional chemotherapy is generally very effective and safe.

**111. Regarding follicular carcinoma of thyroid gland**

- a- It presents at a later age than papillary carcinoma.
- b- It disseminates via hematogenous routes.
- c- It is the most common type of well-differentiated thyroid carcinoma.
- d- Follicular carcinomas are frequently multicentric.

**112. A varicocele**

- a- Consists of aneurysmal dilatation of the testicular artery
- b- May be associated with a left renal tumour
- c- May be associated with infertility
- d- Requires surgery in all cases

**113. Regarding postoperative nutritional support**

- a- Early enteral feeding is able to maintain the gut mucosal barrier
- b- Parenteral nutrition usually given through a central line
- c- An enterocutaneous fistula may be an indication for parenteral nutrition
- d- Acute cholecystitis is a recognised complication of parenteral nutrition

**114. In contrast to closed reduction, open reduction of a fracture**

- a- Produces a shorter healing time
- b- Decreases trauma to the fracture site
- c- Reduces the risk of infection
- d- Requires longer periods of immobilization

**115. Regarding meningiomas:**

- a- Meningiomas are relatively benign tumors
- b- Occur predominantly in men
- c- Are treated primarily by surgical excision
- d- Arise from the dura



**116. About surgical procedures on the colon and rectum:**

- a. Successful healing of colonic anastomoses depends on the adequacy of the blood supply.
- b. In excising part of the colon containing cancer, the lymphatics should be avoided by dividing the mesentery close to the wall of the colon.
- c. When a colostomy is created it cannot be reversed.
- d. Colostomy should be avoided with colonic perforation or obstruction.

**117. About a Keloid**

- a. Complicates wounds of white and black persons equally.
- b. Should be excised once formed to avoid its further growth.
- c. Treatment includes corticosteroid local injections.
- d. Very rare in wounds less than 2 cm in length.

**118. Concerning the indications for treatment of an oblique inguinal hernia:**

- a. Most adult hernias will remain stable in size, therefore delay seldom affects a surgical repair.
- b. There is no correlation between the length of time that a hernia is present and the risk of major complications.
- c. The morbidity and mortality associated with emergency operation due to hernia complications is significantly greater than for elective repair of the identical hernia.
- d. A truss maintains a hernia in the reduced state, therefore, minimizing the risk of strangulation.

**119. About peritonitis:**

- a. Pain due to peritonitis causes the patient to move restlessly.
- b. Most secondary peritonitis can be treated non-surgically.
- c. Primary peritonitis is commonly due to a perforated viscus.
- d. Tuberculous peritonitis can present with or without ascites.

**120. Regarding a small ureteric stone without ureteric stricture:**

- a. Acute ureteric pain is characteristically associated with frank haematuria.
- b. Ultrasonography might detect back pressure.
- c. Atropine-like drugs are most effective and safe especially for elderly patients.
- d. Definitive treatment should include extracorporeal shock wave lithotripsy.